



Agreement of services provided. Sand Springs Pumpkin Patch Birthday Party – Oct. 2016

Your Name: _____ Date & Time of party: _____

Phone & Email: _____

Pumpkin Patch Contact Information:

Tork Investments LLC (dba Sand Springs Pumpkin Patch Festival)

17516 W. 8th Street (located off Hwy 412 at 177th W. Ave. exit)

Owner: Melissa Torkleson

SandSpringsPumpkinPatch@gmail.com

(918) 640-1869



This agreement is made between **Sand Springs Pumpkin Patch** and _____

(Your Full Name)

Sand Springs Pumpkin Patch Festival agrees to provide the following in order to make your child's Birthday Party experience one full of fun & lasting memories:

Please circle which option below you prefer.....

Option 1: Outside option includes...

*Three reserved/ shaded picnic tables

* One 8' table (for cake & presents)

*Cost for reserved space is \$30 (for a 2-hour party) plus the per child activity pass cost, which allows unlimited access to the pumpkin patch activities for the day, see full list of activities at www.SandSpringsPumpkinPatch.com. Activity pass cost per child is \$8.00.

Option 2: Indoor option includes...

*Tables and chairs for guests, inside climate controlled building next to patch.

*Access to indoor restroom facilities.

*Cost for reserved space is \$60 (for a 2-hour party) plus the per child activity pass cost, which allows unlimited access to the pumpkin patch activities for the day, see full list of activities at www.SandSpringsPumpkinPatch.com. Activity pass cost per child is \$8.00.

*The indoor space can accommodate up to 2 party groups at once. If you prefer a totally private feature, ask for details.

_____ (Your Name) holds Tork Investments LLC (dba Sand Springs Pumpkin Patch) and any of Tork Investments contract volunteer groups or contract vendors, harmless of any and all liability for loss, damage, or injury with any person or child, while on Tork Investments Property. _____ (Your Name) also agrees to cover the cost of any damage done to Tork Investments LLC property, while occupying private party space. A deposit (in the amount of ½ of your reserved space fee) along with this signed form is due upon booking your party date and time. The remaining balance payment for both the reserved space and other services provided (kid activity passes) is due upon the arrival of all accounted paid participants. Upon signing this agreement, both parties agree to the terms stated in this agreement. A 72-hour cancellation policy is in place, in order to receive a refund on any deposit paid.

_____ **Your Signature**

_____ **Date Signed**

OFFICE USE ONLY: Deposit amt pd & date: _____